

Via Facsimile From: Bergman & Song LLP

RECEIVED
CENTRAL FAX CENTER
OCT 08 2010

DATE: October 8, 2010
CLIENT NO.: -H0630-0003-P003

MESSAGE TO: Commissioner for Patents

COMPANY: United States Patent and Trademark Office

FAX NUMBER: 571-273-8300

PHONE: _____

FROM: Michael Bergman

COMPANY: Bergman & Song LLP

PHONE: 617-868-8871

FAX NUMBER: 617-868-8881

PAGES (Including Cover Sheet): 20 HARD COPY TO FOLLOW: YES NO

| | | | |
|----------|--|------------|--|
| SENT BY: | | DATE/TIME: | |
|----------|--|------------|--|

MESSAGE:

Atty Docket No.: H0630-0003-P003
 Inventor: Robert J. HALES
 Application No.: 09/897,429 Filing Date: July 3, 2001
 Title: SYSTEM AND METHOD FOR NETWORK INFRASTRUCTURE
 MANAGEMENT

Documents Filed:

1. Credit Card Payment Form PTO-2028 (Charge \$1,110) (1 p)
2. Transmittal Form PTO/SB/21 (1 p)
3. Fee Transmittal Form PTO/SB/17 (1 p)
4. Request for Extension of Time (2 pp)
5. Amendment & Response (14 pp)

Certificate of Facsimile Transmission under 37 C.F.R. §1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, facsimile number 571-273-8300, on:


 Michael Bergman Reg. No.: 48,318

OCT 08 2010

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at 617-818-3053, or e-mail at MBergman@BergmanSongLLP.com, and send the original transmission to us by return mail at the address below. This transmission is intended for the sole use of the individual and entity to which it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

RECEIVED
CENTRAL FAX CENTER

OCT 08 2010

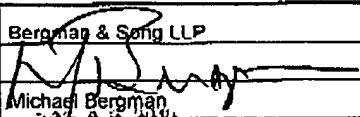
PTO/SB/21 (01-08)

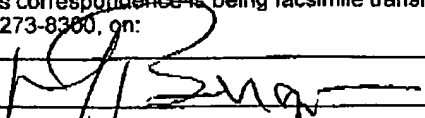
Approved for use through 02/29/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|--|----------------------|---------------------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 09/897,429 |
| | Filing Date | July 3, 2001 |
| | First Named Inventor | Robert J. HALES |
| | Art Unit | 2123 |
| | Examiner Name | Jason Scott PROCTOR |
| Total Number of Pages in This Submission | H0630-0003-P003 | |

| ENCLOSURES <small>(Check all that apply)</small> | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Credit Card Form (1 p) <input checked="" type="checkbox"/> Amendment / Reply (14 pp) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (2pp) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Facsimile Cover Sheet (1p) |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm Name | Bergman & Song LLP |
| Signature |  |
| Printed name | Michael Bergman |
| Date | OCT 08 2010 |
| Reg. No. | 42,318 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
|---|---|
| Certificate of Facsimile Transmission under 37 C.F.R. §1.8 | |
| I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, facsimile number 571-273-8300, on: | |
| Signature |  |
| Typed or printed name | Michael Bergman Reg. No.: 42,318 |
| Date | OCT 08 2010 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

In you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OCT 08 2010

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0851-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|---|--------------------------|---------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008 | Complete If Known | |
| | Application Number | 09/897,429 |
| <input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27 | Filing Date | July 3, 2001 |
| | First Named Inventor | Robert J. HALES |
| TOTAL AMOUNT OF PAYMENT (\$) \$1,110 | Examiner Name | Jason Scott PROCTOR |
| | Art Unit | 2123 |
| | Attorney Docket No. | H0630-0003-P003 |

METHOD OF PAYMENT (check all apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 50-3950 Deposit Account Name: Bergman & Song LLP
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
 Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | | | | | | | \$ 0.00 |
| Design | | | | | | | |
| Plant | | | | | | | |
| Reissue | | | | | | | |
| Provisional | | | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|------------------------------------|---------------|
| - 20 or HP = | 0 | x .00 | = \$ 0.00 | .00 | \$ |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| - 3 or HP = | 0 | x \$0.00 | = \$ 0.00 |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is _____ (for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|--------------------------------------|---------------|
| - 100 = | - 100 | / 50 = -2 | (round up to a whole number) x .00 = | \$ 0.00 |

4. OTHER FEE(S)

Non-English Specification, fee (no small entity discount) _____

Other (e.g., late filing surcharge): Three Month Extension of Time **\$1,110**

| | | | |
|---------------------|-----------------|---|-------------------------|
| SUBMITTED BY | | | |
| Signature | | Registration No. 42,318 (Attorney/Agent) | Telephone 617-868-8870 |
| Name (Print/Type) | Michael Bergman | | Date OCT 08 2010 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.